PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I							;	SMALL ENTITY			OTHER	THAN
			(Column 1)		(Column 2)		•	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			36 minus 20=		*			X\$ 9=		OR	X\$18=	288 °E
INDEPENDENT CLAIMS			9 minus 3 =		*			X40=		OR	X80=	4800
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0"						column 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1) (Column 2) (Column 3)							_	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 4144	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	DETIPLE DEF	ENDEN	CLAIM			+135=	-	OR	+270=	- ·
								TOTAL ADDIT. FEE		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)								<u> </u>	,	ADDIT. FEE	
AMENDMENT B		(Column 1) CLAIMS		HIGH		(Column 3)	Г		ADDI-	1 1		ADDI-
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	1
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)									-		
AMENDMENT C	•	CLAIMS		HIGH	EST		Г		ADDI-	 		ADDI-
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OD	X80=	
lacksquare	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2 write "0" in column 2								+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												